

Compassion Fatigue: Proactive Approaches to Counter Physical, Emotional and Spiritual Depletion

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Learning Objectives

- Discover the differences between burnout, compassion fatigue and vicarious trauma.
- Uncover the role of stress responses in experiencing compassion fatigue.
- Assess and score current of level of professional satisfaction.
- Learn adaptive coping skills to prevent, lessen and/or mitigate compassion fatigue.

Definitions

Stress

- Noun: A specific physiological response by the body to a stimulus, as fear or pain, that disturbs or interferes with the normal physiological equilibrium of an organism.

Burnout

- Noun: Fatigue, frustration, or apathy resulting from prolonged stress, overwork, or intense activity.

Compassion Fatigue

- Noun: The inability to react sympathetically to a crisis, disaster, et cetera, because of overexposure to previous crises, disasters, et cetera.

Secondary Traumatic Stress

- Secondary traumatic stress is the emotional duress that results when an individual hears about the firsthand trauma experiences of another. In the past, it was said that the symptoms mimic those of Posttraumatic Stress Disorder (PTSD). Per the DSM 5, Secondary Traumatic Stress is PTSD.

Vicarious Trauma

- A transformation in the sense of self of a helper that results from empathic engagement with traumatized clients and their reports of traumatic experiences...Its trademark is disrupted spirituality and/or a disruption in the helpers perceived meaning and hope.

Impairment

(Disruption In Wellness)

- Noun: The state of being diminished, weakened, or damaged, especially mentally or physically.

Stress Responses,

Burnout

&

Compassion Fatigue

Stress is a normal and natural reaction to a perceived threat, challenge or change.

Eustress (constructive)

Positive stress, or beneficial stress, that is essential for a full and productive life. It increases creativity, productivity, ability to adapt, and happiness.

Distress (destructive)

Negative aspects of stress that can become a destructive force when it gets “out of control,” thus having a negative impact on health, personalities, families and jobs.

Stress is essential for a productive life.

In fact, growth comes from discomfort.

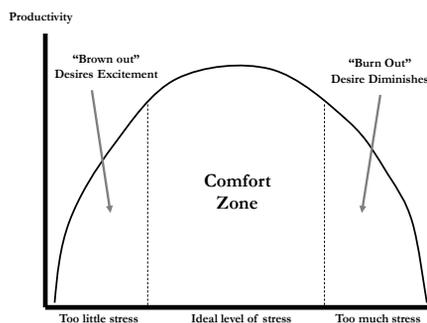
However, prolonged distress, or crisis, is harmful.

Keep in mind:
Stress is stress.

Based on perceptions, life experiences, and beliefs, certain stressors wears people out over time and the other stressors knocks them down.

WHEN STRESS HELPS YOU GET THINGS DONE

<https://hbr.org/2017/04/an-early-warning-system-for-your-teams-stress-level>



Types of Stressors

Environmental:

Noise, clutter, dust, traffic, small spaces, temperatures, extreme weather conditions, rapid decision making, et cetera.

Types of Stressors

Psychosocial:

Family relationships, conflicts with co-workers, conflicts with bosses, lack of appreciation, disrespectful peers, et cetera.

Types of Stressors

Personality:

Unable to say "no," need to be liked, feelings of guilt or shame, anxiety over professional competencies, negative outlook on situations, sensitivity to criticism, high expectations for self, guilt from mistakes or not being perfect, et cetera.

Types of Stress

Intrapersonal Stress (internal)

Stress that occurs when we are not living the lives in the way, or style, that we believe we should based on our character or personality.

Types of Stress

Cumulative Stress (outer stressors)

Build-up of work or non work related stressors

Types of Stress

Acute Stress

Abnormal events that happen to normal people.

Extraordinary events that cause extraordinary reactions.

Types of Stress

Delayed Stress

Posttraumatic Stress Disorder and/or Secondary Trauma.

Delayed Acute Stress that is incident specific

CATEGORIES OF STRESS

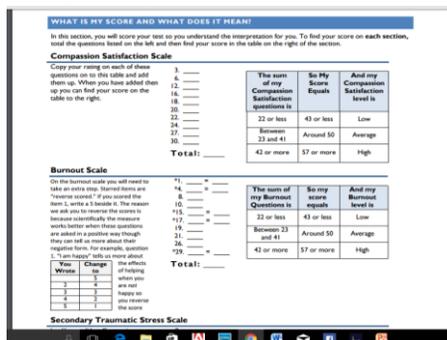
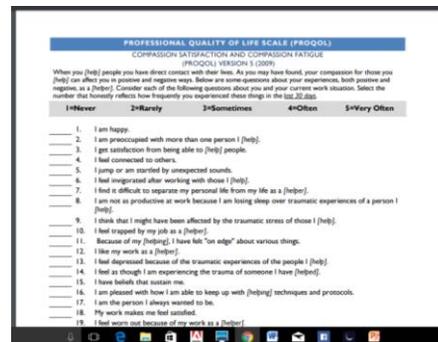
- Developmental
- Transitional
- Traumatic Stress
- Psychological

Assessment Tool: PROQOL

PROQOL

- **“Professional quality of life** is the quality one feels in relation to their work as a helper. Both the positive and negative aspects of doing your work influence your professional quality of life. People who work helping others may respond to individual, community, national, and even international crises. They may be health care professionals, social service workers, teachers, attorneys, police officers, firefighters, clergy, transportation staff, disaster responders, and others. Understanding the positive and negative aspects of helping those who experience trauma and suffering can improve your ability to help them and your ability to keep your own balance.”

http://www.proqol.org/Home_Page.php



The Stress-APGAR

According to Hellwig, Rook, Florent-Treacy, & Kets de Vries, Stress-APGAR is not a test, survey, or assessment tool. It provides a set of guidelines that assists in determining factors that may lead to burnout.

Our Stress-APGAR acronym recalls five key areas of potential pressure overload.

A - appearance: How does the person look? Does he/she seem overly tired? Has he/she been gaining or losing weight? Is there any indication of substance abuse?

P - performance: A decrease in performance, particularly over time, may be linked to increasing distress. On the other hand, a forced effort to over-perform — becoming a workaholic — is also a warning sign.

G - growth tension: Growth is a result of learning and stretch goals. Everyone is different; some people take to new challenges easily, whereas others may find them more difficult. Is the person becoming bored? Or conversely, does the person seem overwhelmed?

A - affect control: "Affect" is another word for "emotion." Everyone has good and bad days, but most people can regulate their emotions in a way that is appropriate for the workplace. However, noticeable and lasting changes in emotional state (emotional outbursts or high and low mood swings) can be related to an overload of physical and psychological pressure.

R - relationships: Personal relationships are an essential part of mental health. In situations of increased stress, it is possible to observe deterioration in the quality of relationships at work (social isolation).

Additional Assessment Tools

The Holmes and Rahe Stress Scale

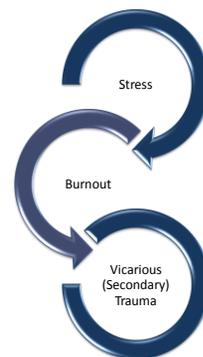
https://www.mindtools.com/pages/article/newTCS_82.htm

Multiple Intelligences for Adults

<http://www.literacynet.org/mi/assessment/findyourstrengths.html>

Free Personality Test (Myers Briggs)

<https://www.16personalities.com/free-personality-test>



Peer-reviewed Research Articles

"Understanding Compassion Fatigue in Healthcare Providers: A Review of Current Literature" – Sorenson, C., et al

"Perceptions of High-involved Work practices and Burnout: the Mediating Role of Job Demands" – Kilroy, S., Flood, P., Bosak, J., Chenevert, D.

"An Intervention to Improve Respiratory Therapists' Comfort With End-of-Life Care." – Brown-Saltzman, K., Upadhy, D., Larner, L., Wenger, N.

"Moral Distress In Intensive Care Unit Professionals Is Associated With Profession, age, and years of Experience." - Dodek, P., et al

Peer-reviewed Research Articles

(Editorial) "Burnout in the ICU: Playing With Fire?" – Divatia, J.

(Letter) "Impact of Leadership on ICU Clinicians' Burnout" – Omar, A., et al

"A New Approach to Identify High Burnout Medical Staff by Kernel K-Means Cluster Analysis in a Regional Teaching Hospital in Taiwan" – Lee, Y., Huang, S., Huang, C., Wu, H.

"Burnout in the Intensive Care Unit Professionals" – Guntupalli, K., Wachtel, S., Mallampalli, A., Surani, S

Coping Skills to Mitigate Compassion Fatigue

More Definitions

Self-Care

- Noun: The care of oneself without medical, professional, or other assistance or oversight.

Coping Skills

- Noun: Any characteristic or behavioral pattern that enhances a person's adaptation. Coping skills include a stable value or religious belief system, problem solving, social skills, health-energy, and commitment to a social network.

Whether your having a good day or a bad day, it is still the same day.

You get to choose what to do with your day.

Types of Coping

Action-based coping

- Action-based coping involves actually dealing with a problem that is causing stress. Examples can include getting a second job in the face of financial difficulties, or studying to prepare for exams. Examples of action-based coping include planning, suppression of competing activities, confrontation, self-control, and restraint.

http://hopecalls.org/m_coping.html

Types of Coping

Emotion-based coping

- Emotion-based coping skills reduce the symptoms of stress without addressing the source of the stress. Sleeping or discussing the stress with a friend are all emotion-based coping strategies. Other examples include denial, rationalization, repression, wishful thinking, distraction, relaxation, and humor. There are both positive and negative coping methods.

http://hopecalls.org/m_coping.html

Unhealthy Coping Skills

Harmful coping methods

- Some coping methods are more like habits than skills, and can be harmful. Overused, they may actually worsen one's condition. Alcohol, cocaine, and other drugs may provide temporary escape from one's problems, but, with excess use, ultimately result in greater problems. Other less extreme cases involve skin biting, nail biting, and hair pulling.

http://hopecalls.org/m_coping.html

Pathways for Habits or Patterns (Coping):

* **Reward**

* **Relief**

Maladaptive is quick, but ineffective for long-lasting beneficial results.

Adaptive takes far more work and will lead to beneficial results.

Thoughts, Feelings & Reactions

"Listening" to our bodies can often help us understand emotions. "What are you feeling?" might be more difficult to answer than "What is your stomach or body doing?"

"For instance when we experience "butterflies in the stomach", this really is the brain in the stomach talking to the brain in your head. As we get nervous or fearful, blood gets diverted from our gut to our muscles and this is the stomach's way of protesting."

<http://www.bbc.com/news/health-18779997>

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Posttraumatic Growth (~20 minutes):

https://www.ted.com/talks/jane_mcgongal_the_game_that_can_give_you_10_extra_years_of_life?language=en

Stress Perception (~15 minutes):

https://www.ted.com/talks/kelly_mcgongal_how_to_make_stress_your_friend?language=en

We cannot change what we do not acknowledge, so it is essential to understand your unique stress reactions.

Symptoms of Stress

Physical

Pupils dilate (*headache*), saliva thickens, acid in the stomach increases (*gas*), digestion slows, blood flow changes (*cold hands/feet*), cholesterol increases, heart rate increases, increased salt in cartilage (*joint pain/low back pain*), muscles tighten

"Fight, Flight or Freeze"

Symptoms of Stress

Mental

Memory changes (*decrease*), "Flashbulb" memories, decreased concentration, decreased attention span (*10-12 min.*), slowed learning speed, decreased problem solving ability, impaired decision-making, decreased self-awareness/proprioception, tunnel vision, altered time perspective (*slows*), feelings of indispensability ("I need to do it since no one else can.")

Symptoms of Stress

Emotional

Feeling isolated, reactive depression (*helpless anger turned inward*), anger (*results from fear or sadness*), bitterness (*burn out*), decreased trust and intimacy (*willingness to be vulnerable*), decreased interaction with co-workers/friends/family, sadness (*stemming from loss*)

Interventions for Physical Symptoms

Gain knowledge/education Exercise, relaxation, proper diet, drink plenty of water, nutrition (every couple hours), vitamins/minerals/supplements, dark room (20 min.), relaxation training and sleep

Interventions for Mental Symptoms

Orientate in time and space, be patient with yourself and with others, be aware of your thought patterns and choose to counter unproductive patterns, allow brain to calm down - walking meditation (14 – 30 paces) or progressive relaxation, costume change, rituals, time management, be systematic, take action - Tara List (write down worries) and Work Walk, and take notes (7 Items & 30 sec.)

Interventions for Emotional Symptoms

*Enhanced communication (verbal/nonverbal, sending/receiving), talk or journal about (a brief respite) and **reframe** (true resolution) thoughts and reactions about stress, discover and action on resolutions (big or small), seek/accept feedback from others, clarify spiritual values/beliefs,*

Deep Breathing

Breathe in and out from your diaphragm (not chest).
Breathe in for four (4) seconds
Breathe out for four(4) seconds
This is one (1) cycle
Complete at least six (6) to twelve (12) cycles

This changes the blood flow from your chest (heart and lungs = preparing for Survival/Fight and Flight) to your extremities (arms and hands), which cues the brain that it is no longer in Survival/Fight or Flight mode.

Activities that Engage Frontal Lobe

(Re-allocate energy from the Limbic System, to Frontal Lobe)

Counting
Adding
Subtracting
Organizing
Alphabetizing
Word Searches
Jigsaw Puzzles
Balancing on one leg
Hopping on one leg
*Mindfulness
*Grounding

This type of action based coping pulls energy to the frontal lobe (thought and control center) and away from the Limbic System (intricate Fight and Flight/Survival Center)

Mantras

"Fear is not real. Danger is real."

"Anxiety is my fear, linked to the future, linked to my imagination."

"What are the facts that counter my anger/fear/anxiety?"

"Focusing on anxious/anxious/negative thoughts is similar to wishing for the very thing that I fear."

F.E.A.R. = Forget Everything and Run;
False Evidence Appearing Real
OR
Face Everything and Recover

Mantras

"Gratitude counters fear."

"Compassion counters anger."

"Action counters anxiety."

"What I focus on grows."

"We train people how to treat us."

"Energy flows where attention goes."

Applications (a.k.a Apps)

- Breathe2Relax
- Prana Breath
- Virtual Hope Box
- T2 Mood Tracker
- Guided Meditat(e)
- Headspace
- Others?

Gratitude Builds Resiliency**Daily Gratitude Journal:**

- Successes / Positives
- Challenges / Negatives
 - How did you cope?
 - Adaptive?
 - Maladaptive?
- What are you grateful for?

Humor Builds Resiliency (1:44):

<https://www.youtube.com/watch?v=RP4abiHdQpc>

Emotional Intelligence

Emotional Intelligence is the ability to perceive emotions, use emotions to facilitate thought, to process emotions, and to manage emotions.

Emotional Intelligence is correlated with increased sense of empathy, use of emotions without being defensive, and awareness of potential relationship estrangements.

(Rieck, Callahan & Watkins, 2015)

- **Empathy** – The ability to read, sense, even anticipate the emotional makeup of other people.
- **Communication skills** - Being able to communicate your needs and feelings, in addition to being willing to listen to and understand other's feelings.
- **Social Competence** – A proficiency in managing relationships and building networks.

3. The ability to read other's emotions: Understanding what others are feeling and being open to understanding their vantage point.

4. The ability to manage your relationships: How do you interact with others? Do you provoke arguments? Do you avoid conflict whenever possible?

<https://steemit.com/life/@sirwinchester/why-emotional-intelligence-is-a-key-factor-to-success>

Emotional Intelligence includes:

- **Self-Awareness** – The ability to recognize and understand your own moods, emotions and drives, as well as their effect on others.
- **Self-Regulation** – The ability to control or redirect disruptive impulses and moods and the inclination to suspend judgment and think before acting.
- **Motivation** – A passion to work for reasons that go beyond money or status, and a tendency to pursue goals with energy and persistence.

Emotional Intelligence can also be described in these four skills:

1. The ability to understand your own emotions: Being aware of the different emotions that you recognize and experience, as well as experiences that may trigger emotions.
2. The ability to control your emotions: Having the discipline and self-control yourself to not give in to every emotion.

Emotional Intelligence

“[Emotional Intelligence] has been found to correlate with an increased sense of empathy, more positive doctor-patient relationships, improved teamwork and communication, stress management, organizational commitment, and leadership.”

(Rieck & Callahan, 2013)

**Patient Satisfaction Scores: Making the Connection
With Your Patients Per**

American Association for Respiratory Care

"Nothings bonds better than eye-level contact. Ask permission to sit and talk to them. Ask open-ended questions to get more than a "yes" or "no" response. Questions about family, work, and hobbies are good ice-breakers that show you are interested in them beyond the treatment level."

— Karen Lane, RRT, Saint Charles, MO

"First impressions really do count. Our staff makes sure to walk up to the patient where they are sitting in the waiting room, rather than shouting their name at the door. We greet them with a smile, a handshake, and eye contact; offer to help them up if they are elderly or otherwise in need, and offer to carry any belongings."

— Cathy Lynn Case, BSEd, RRT, CPFT, Edgewater, CO

"It's best to use short, simple words and stick to one topic at a time. Listen to what patients are telling you and don't interrupt your patients even though you know what they are going to ask."

— Vickie Klein, CRT, CPFT, Lee's Summit, MO

"Empathy, humor, and trust are paramount to a great partnership. I used to make them feel like they're not alone but sometimes they want you to know that they don't fit into the same categories as all others (i.e., COPD) like them. They want to be treated like an individual, and yes, they are different from the patient in the other room with the same condition."

— Elyse Carroll, BSRC, RRT, AE-C, New Britain, CT

"I understand many patients lose their sense of personal identity, and almost all lose a great deal of privacy, when hospitalization is required. Therefore, I try to relate to patients as individuals. For instance, if I see get well cards or flowers or balloons or drawings, I may say something like "oh, that's very nice." If the patient chooses to respond I may ask about who sent it or how they know that person. My intent is to reinforce the patient's connection to the outside and perhaps provide a pleasant memory. I think it also helps the patient level of cooperation."

— Barry Westling, MSc, RRT-NPS, RPFT, FAARC, Merlin, OR

SUCCESS

To laugh often and much; to win the respect of intelligent people and the affection of children; to earn the appreciation of honest critics and endure the betrayal of false friends; to appreciate beauty; to find the best in others; to leave the world a bit better, whether by a healthy child, a garden patch, or a redeemed social condition; to know even one life has breathed easier because you lived; this is to have succeeded.

-- an adaptation of a poem published in 1905 by
Bessie Stanley

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